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## REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND

CHANGE OF CORRESPONDENCE ADDRESS

Application Number	09/635_974		
Filing Date	08/09/2000		
First Named Inventor	Thomas Teufel		
Art Unit	1643		
Examiner Name	TUNGATURTHI, Parithosh		
Attorney Docket Number	1017.35558-US		

I hereby revoke all previous powers of attorney given in the above-identified application:							
		ey is submitted herew					1333
X I hereby appoint the practitioners associated with the Customer Number: 20311							
X Please change the correspondence address for the above-identified application to:							
The address associated with 20311 Customer Number:							
OR							
Firm or Individua	Firm or Individual Name						
Address							
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Telephone				Email	10 Bass		
I am the: Applicant/Inventor.							
X Assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37CFR 3.73(b) is englosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Signature Name	Thomas	C. Gallagher	•		<del></del>	······	
Date				Telephone	GIIG G	28 502	· · · · · · · · · · · · · · · · · · ·
Date July 31, 2007 Telephone 646–638–5031  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
	The second secon	ne signature is required, se rns are submitted.	e below".	·····			····
LI TOTAL OI	(0)	THE GIC SUBTRICU.					

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.34. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STATEMENT UNDER 37 CFR 3.73(b)		
Applicant/Patent Owner: Thomas Teufe1		
Application No./Patent No.: 09/635,974 Filed/Issue Date: 08/09/2000		
Entitled: TREATMENT OF HYPERPROLIFERATIVE DISEASES WITH EPIDERMAL GROWTH FACTOR RECEPTOR ANTAGONISTS  Imclone Systems Incorporated , a Corporation		
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)		
states that it is:		
1. X the assignee of the entire right, title, and interest; or		
2. an assignee of less than the entire right, title and interest  The extent (by percentage) of its ownership interest is%		
in the patent application/patent identified above by virtue of either:		
A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United Pater States Patent and Trademark Office at Reel, Frame, or a true copy of the original assignment is attached.		
is attached.  OR		
B. X A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:		
1. From: Thomas Teufel To: Imclone Systems Incorporated The document was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.		
2 From:		
3. From: To:		
The document was recorded in the United States Patent and Trademark Office at  Reel, Frame, or for which a copy thereof is attached.		
Reel, Frame, or for which a copy thereof is attached.		
Additional documents in the chain of title are listed on a supplemental sheet.		
As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.  [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]  The undersigned (whose title) is supplied below) is authorized to act on behalf of the assignee.		
July 31, 2007		
Signature Date Thomas C. Gallagher		
646-638-5031		
Printed or Typed Name Telephone number  Vice President, Intellectual Property		
Title		

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FORM PTO-1595 (Modified) (Rev. 6-93) OM8 No. 0551-0011 (exp. 4/94) Copyright 1994-97 LegalStar P08/REV02

## RECORDATION FORM COVER SHEET

U.S. DEPARTMENT OF COMMERC

et No.: 381-86

Patent and Trademark Offic

PATENTS ONLY

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To the Honorable Commissioner of Patents and Trademarks	Please record the attached original documents or copy thereof.
Name of conveying party(ies):     Thomas Teufel, M.D.	Name and address of receiving party(ies):
	Name:ImClone Systems Incorporated
	Internal Address:
Additional names(s) of conveying party(ies) ☐ Yes ☒ No	
3. Nature of conveyance:	
⊠ Assignment ☐ Merger	Street Address: 180 Varick Street, 7th Floor
☐ Security Agreement ☐ Change of Name	
☐ Other	City: New York State: NY ZIP: 10014
Execution Date: December 5, 2000	Additional name(s) & address(es) attached?   Yes  No
4. Application number(s) or registration numbers(s):	
If this document is being filed together with a new application	, the execution date of the application is:
A. Patent Application No.(s)	B. Patent No.(s)
00/675 074	
09/635,974	
Additional numbers attac	ched? 🔲 Yes 🖾 No
5. Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved:
Name: Irving N. Feit, Esq.	7. Total fee (37 CFR 3.41):\$ 40.00
Internal Address: HOFFMANN & BARON, LLP	Enclosed - Any excess or insufficiency should be credited or debited to deposit account
	Authorized to be charged to deposit account
Street Address: 6900 Jericho Turnpike	8. Deposit account number:
City: Syosset State: NY ZIP: 11791	
DO NOT	USE THIS SPACE
9. Statement and signature.  To the best of my knowledge and belief, the foregoing inform of the original document.  \( \)	. 91
James F. Harrington (2 Wir	J- Harrengh 10-18-00
Name of Person Signing  Total number of pages lactuding cover st	Signature Date Date attachments, and document:

Attorney's Docket No.: 3	81-86		PATENT
		For:	☐ U.S. and/or ☐ Foreign Rights ☐ U.S. Application; ☐ U.S. Provisional Application; ☐ U.S.Patent; or
		Ву:	☐ PCT Application ☐ Inventors or ☐ Present Owners
	ASSIGNMENT O	F INVENTION	ſ
In consideration of (\$1.00), the receipt of which consideration,			NOR of the sum of One Dollar good and valuable
ASSIGNORS: (inventor(s) or	person(s) or entity(ies) who ow	n the invention)	•
	Thomas Teufel, M.D. Name	), ,	
	1801 SE 43rd Street Address		
	Capre Coral, FL 339	04	<del></del> .
	U.S.A. Nationality		<u> </u>
(If assignment is by person or entity	v to whom invention was previo	usly assigned and this	s was recorded in PTO add the following)
Recorded on	Reel Frame	e	
hereby sells, assigns and tr	ansfers to		
ASSIGNEE:			
	ImClone Systems Inco (Type or print name or		
	180 Varick Street, 7th Address	Floor	incor
	New York, NY 10014		
	U.S.A.		· · · · · · · · · · · · · · · · · · ·
	Nationality		

and the successors, assigns and legal representatives of the ASSIGNEE, (complete one of the following) the entire right, title and interest an undivided \_\_\_\_\_ percent (\_\_\_\_\_%) interest for the United States and its territorial possessions and in all foreign countries, including all rights to claim priority,  $\boxtimes$ in and to any and all improvements which are disclosed in the invention entitled: TREATMENT OF HYPERPROLIFERATIVE DISEASES WITH EPIDERMAL GROWTH FACTOR RECEPTOR ANTAGONISTS and which is found in (check and complete (a), (b), (c), (d), (e), (f), or (g)) U.S. patent application executed on even date herewith (a) U.S. patent application executed on (b) U.S. provisional application naming the above inventor(s) for the above-identified (c) invention. Express Mail label No.: \_\_\_\_, mailed: To comply with 37 CFR 3.21 for recordal of this assignment, I, an ASSIGNOR signing below, hereby authorize and request my attorney to insert below the filing date and application number when they become known U.S. application Serial No. 09/635,974 filed on August 9, 2000 (d) International application No. PCT/\_\_\_\_/ (e) U.S. Patent No. \_\_\_\_\_ issued (f) A change of address to which correspondence is to be sent regarding patent maintenance fees is being sent separately. and any legal equivalent thereof in a foreign country, including the right to claim

and, in and to, all Letters Patent to be obtained for said invention by the above application or any continuation, division, renewal, or substitute thereof, and as to Letters Patent any re-issue or reexamination thereof.

(g)

priority

ASSIGNOR hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment.

ASSIGNOR further covenants that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention and said Letters Patent and legal equivalents as may be known and accessible to ASSIGNOR and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said application, said invention and said Letters Patent and said equivalents thereof which may be necessary or desirable to carry out the purposes thereof.

## IN WITNESS WHEREOF, I/We have hereunto set hand and seal this

	WARNING: Date of signing must be th	e same as the date of execution of the application if item (a) was checked
ibove.	* * * * * * * * * * * * * * * * * * *	
Date:	x 12/5/00	X Momes lengt
<i></i>	Date of signing (	Thomas Teufel, M.D.
-	The second secon	is necessary. If the assignment is notarized or legalized then it will only b
dole: I	no witnessing, notarization of regarization prima facic evidence of execution 35 US	C 26L Use next page if notarization is desired.
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		Notarization or Legalization Page Added.